



PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

536727

CLAIMS AS FILED - PART I									SMALL	EN'	TITY		OTHER	THAN
			(Column 1)			(Column 2)			TYPE			OR	SMALL	
FOR			NUMBER FILED			NUMBER EXTRA			RATE		FEE	(()	RATE	FEE
BASIC FEE										34	45.00	OR	3.5	690.00
TOTAL CLAIMS			1	minus	20=	*	j		X\$ 9=		1	OR	X\$18=	
INDEPENDENT CLAIMS			1	minus	3 =	*	/		X39=	╁		1	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									400	十		OR		
* If the difference in column 1 is less than zero, enter "0" in column 2								+130=	Ļ		OR	+260=		
CLAIMS AS AMENDED - PART II									TOTAL	L'	<u> </u>	OR	TOTAL	
(Column 1) (Column 2) (Column 3)									SMALL	ENT	ΊΤΥ	OR	OTHER SMALL I	
AMENDMENT A		REM/ AF	AIMS AINING TER DMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIG	DDI- NAL EE		RATE	ADDI- TIONAL FEE
	Total	•	1	Minus	***	20	= 0		X\$ 9=/	1		OR	X\$18=	7
	Independent	* Y	TOE M	Minus	***	<u> </u>	=		X39=			OR	X78=	, .
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									/ +130=			OR	+260=	
						•		X	TOTAL	 			TOTAL	
		(Colu	mn 1)		(C	olumn 2)	(Column 3)	[F	NDDIT. FEE			1 011	ADDIT. FEE	
AMENDMENT B		CL	AIMS		F .	HIGHEST	(Colainii o)	lr	" 	T 7.	\triangleleft	1 1		1
		AF	NINING TER DMENT		PR	NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIC	EE VVAL		RATE	ADDI- TIONAL FEE
	Total	·)		Minus	** (20	O .		X\$ 9=			OR	X\$1/8=	FEE
AME	Independent)	Minus	***	3	= 3		X39=/				X 78=	
_	FIRST PRESE	OFFATIO	N OF M	ULTIPLE DEI	PEND	ENT CLAIM		-		_		OR	/\\\	
									+130=			ОВ	+260=	
									UTOTAL DDIT. FEE			ØR ,	TOTAL ADDIT. FEE	
			mn 1)			olumn 2)	(Column 3)							
AMENDMENT C		REMA AF	IIMS IINING TER DMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=			OR	X\$18=	1
		*		Minus	***		=	ŀ	X39=	<u>-</u>		ŀ	X78=	
	FIRST PRESEN	┝				OR	A76=							
• If	the entry in colum	nn 1 is le	ss than th	e entry in colu	mn 2, '	write "0" in col	umn 3.	Ĺ	+130=			OR	+260=	
***!	i the "Highest Num f the "Highest Num	nber Prev nber Prev	riously Pa ∕iously Pa	iid For" IN THIS aid For" IN THIS	S SPA	CE is less that	n 20, enter "20."		TOTAL DDIT. FEE		ليسمي		TOTAL DDIT. FEE	
7	The "Highest Numb	oer Previ	ously Paid	d For" (Total or	Indep	endent) is the	highest number	r foun	d in the app	ropri	ate box	in colu	ımn 1.	